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CONFIRMATION NO. 3317

<b>SERIAL NUMBER</b> 10/607,455	<b>FILING OR 371(c) DATE</b> 06/26/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1644	<b>ATTORNEY DOCKET NO.</b> 09799910-0034
<b>APPLICANTS</b> Paula J. Bates, Louisville, KY; Yingchang Mi, Tianjan, CHINA; <i>of</i>				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/392,143 06/26/2002 <i>of</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>None. Pat</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 11/19/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>None. Pat</i> Acknowledged <i>Pat</i>		<b>STATE OR COUNTRY</b> KY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 41
Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 43320				
<b>TITLE</b> Method for the detection of apoptosis				
<b>FILING FEE RECEIVED</b> 639	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	